# Exhibit 1

FCC Form 486	Do Not Write in this Area	Approval by OMB 3060-0853 Estimated time
		per response: 1.5 hours
	Schools and Libraries Universal S	
To be completed by the Billed Entity	Receipt of Service Confirmation	Form
Please read instructions before com-	oleting.	(You can also file online at www.usac.org/sl.)
Applicant's Form Identifier (Create your own code to identify		86 Application#:
Block 1: Billed Entity Informat		assigned by administrator)
Name of Billed Entity		
Pueblo City	School District	60
2. Billed Entity Number	3. Funding Year July 1.	2009 through June 30, 2010
4. Complete Mailing Address of	f Billed Entity	
Street Address, P.O. Box, or	Route Number 315 い!	1th Street
	313 W	II. SHEEL
City D 1 1	State	Zip Code
<u>tueblo</u>		81003
Telephone Number 719-549-729	Extension Fax Number	719-549-7281
5. Contact Person Information Contact Person Name	assie Walgren	
Street Address, P.O. Box o	Route Number	1
	315 W. 11th St	reeI
City Pueblo		
State Zip Code &	1003	
Check the box next to the prefe	rred mode of contact. (At least one	box MUST be checked.)
Li l'elephone Number	Extension	er
719-549-71	21 719	-549-7195
Email Address  Cassandra.	valgren@puebloci	
	0 4 8 6 0 1 0 1 0 3	

Entity Number 142321 Applicant's Form Identifier UNITE WAN
Contact Person Cassie Walgren Phone Number 719-549-7121
Block 2: Early Filing Information and CIPA Waiver Requests
6a. Early Filing
CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING <b>ON OR BEFORE</b> JULY 31 OF THE FUNDING YEAR.
The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.
Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.
6b. CIPA Waiver
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.
I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.
6c. CIPA Waiver for Libraries for Funding Year 2004
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.
am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (I), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



	ty Number <u> </u>	142321 Cassie U	Applicant's Form Identifier _ Dalaren Phone N	UNITE WAN   umber 719-549-712	
Bloc	k 3: Service Info	ormation			
7.	lf you need	ed service provide Remen additional pages	ler may begin submitting involo mber: The FRNs listed below m	Block 5 (Discount Funding Request) item for which ces to SLD. You will need your FCDL for some of the nust be from the same Funding Year as is listed in Bl	e information required below. lock 1. Item 3
	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
2	650387	1848573	143029868	Unite Private Networks, LLC	07/01/2009
3				•	
4					
5					
6					
7					
8					
10					
11					
12					



Entity Number Contact Person		Applicant's Form Identifier UNITE WAN Walgren Phone Number 719-549-7121
Block 4:Certifica	itions and Signatu	re
8. I certify that	at the entity(ies) rec	eiving discounted services as indicated on this Form 486 are covered by technology

8. I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

Colorado Department of Education

9. I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



Entity Number	142321	Applicant's Form Identifier UNITE WAN
Contact Person	Cassie Wa	gren Phone Number 719-549-7121

### 11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).
- **b.** pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:
- (FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.
- (FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(I) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.
- c. the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

# FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES 1:

- d. I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

## For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

The certification language above is not intended to fully set forth or explain all the requirements of the statute.



Page 5 of 7 FCC Form 486 April 2007

0 4 8 6 0 1 0 6 0 3 Do Not Write In This Area

Entity Number	142321	Applicant's Form Identifier UNITE WAN
Contact Person	Cassie Wa	Gren Phone Number 719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person	13. Date 10.20.09
14. Printed name of authorized person	
Dr. Robert Vise	
15. Title or position of authorized person	
Executive Director of Assessment	and Technology
16a. Street Address, P.O. Box, or Route Number	
315 W. 11th Street	
Pueblo	
State CO Zip Code 81003	
16b. Telephone number of authorized person Extension 16c. Fax nur	mber of authorized person
	9-549-7281
16d. Email address of authorized person	
robert. vise @ pueblocity schools. us	5



Entity Number	42321	Applicant's Form Identifier	LNITE WAN
Contact Person	Cassie Wa	Gren Phone Number	719-549-7121

### FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

#### Please submit this form to:

SLD Form 486 P. O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100

FCC Form 486	Do Not Write in this		
1 00 1 01111 480	Do Not write in this	s Area	Approval by OMB
	ſ		3060-0853
			Estimated time
			per response: 1.5 hours
	Ontractor (12)		
	Schools and Libraries Uni		
To be completed by the Billed Entity	Receipt of Service Confir	mation Form	
Please read instructions before comp	letina	(Val. a	
			an also file online at www.usac.org/sl.)
(Create your own code to identify	MICRO TECH	Form 486 Applic	
Block 1: Billed Entity Informati		(10 De assigned	by administrator)
	on		
Name of Billed Entity			
Pueblo City	School Distr	ict 60	
2. Billed Entity Number			
4. Complete Mailing Address o	3. Funding Year	· July 1, 200	through June 30, 2010
Street Address D.O. Box or F	Pouto Number		
Street Address, P.O. Box, or F	3 L5	w 11th	Ctoot
	712	WIII	Street
City N	State	Zip	Code _
tueblo		$\mathcal{C} \cap \mathcal{C}$	81003
Telephone Number	Extension Fax	Number	81003
719-549-729	2	719-	549-7281
5. Contact Person Information			
Contact Person Name /			
	assie Wala	ren	
Street Address, P.O. Box or	Route Number		
<b>-</b>	315 W 114h	C+~~+	
	710 W. II	211661	
City D			
Kuelolo			
State Zip Code			
	1445		
Chack the box payt to the profes	(003		
Check the box next to the prefer Telephone Number	Extension	ast one box MUS	ST be checked.)
Telephone Number	Extension	ax Number	
719-549-71:	21	719-549	-7195
M Email Address			
cassandra.	valgren@puck	placitysc	hools.us
		, , , , ,	
, 5 8 1	04860101	0 3	II .

Entity Number 142321 Applicant's Form Identifier MICRO TECH
Contact Person Cassic Walgren Phone Number 719-549-7121
Block 2: Early Filing Information and CIPA Waiver Requests
6a. Early Filing
CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING <b>ON OR BEFORE</b> JULY 31 OF THE FUNDING YEAR.
The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.
Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.
6b. CIPA Waiver
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.
I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.
6c. CIPA Waiver for Libraries for Funding Year 2004
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.
I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



	ty Number tact Person	42321 Cassie L	Applicant's Form Identifier  Oalaren Phone N	lumber 719-549-712	
Bloc	k 3: Service Inf	ormation			
7.	If you need	Remen additional pages	er may begin submitting involutions in the submitting involution in the submitting involutions in the submitted in the	Block 5 (Discount Funding Request) item for which ces to SLD. You will need your FCDL for some of th nust be from the same Funding Year as is listed in B , etc. and indicate the number in the space provided	e information required below.
	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
1	696098	1912965	143010971	Microtech-Tel	07/01/2009
2					
3					
4					
5					
6					
7					
8					
10					
11					
12					



Entity Number 142321 Applicant's Form Identifier MICRO TECH  Contact Person Cassic Walgren Phone Number 719-549-7121
Block 4:Certifications and Signature
8. I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.
Colorado Department of Education

- 9. I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.
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IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



Entity Number _	142321	Applicant's Form Identifier	MICRO TECH
Contact Person	Cassie Wa	gren Phone Nun	mber 719-549-7121

#### 11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

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- (FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.
- (FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(I) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.
- c. the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

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Page 5 of 7

FCC Form 486

April 2007

FCC Form 486

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Fatita None ban	14232   Applicant's Form Identifier MICRO TECH
Entity Number	14232 Applicant's Form Identifier MICRO TECH
Contact Person	Cassic Walgren Phone Number 719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person	13. Date 10. 20. 09
14. Printed name of authorized person  Dr. Robert Vise	
15. Title or position of authorized person  Executive Director of Assessmen	nt and Technology
16a. Street Address, P.O. Box, or Route Number 315 W. 11th Street	
Pueblo	
State CO Zip Code 81003	number of authorized person
719-549-7292	719-549-7281
robert. vise@ pueblocity schools.	22



Entity Number 142321 Applicant's Form Identifier MICRO TECH

Contact Person Cassic Walgren Phone Number 719-549-7121

# FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

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### Please submit this form to:

SLD Form 486 P. O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100

0486010703

FCC Form 486	Do Not	Write in this Area		Approval by OMB
				3060-0853
				Estimated time
				per response: 1.5 hours
		ibraries Universa		
To be completed by the Billed Er	Receipt of Se	rvice Confirmatio	n Form	
Please read instructions before of	completing.		(You ca	an also file online at www.usac.org/sl.)
	UNITE LAN		n 486 Applic	ation#:
(Create your own code to ider		(To	oe assigned	by administrator)
Block 1: Billed Entity Inform  1. Name of Billed Entity	nation			
1. Name of Billed Entity		0.1.1		
rueblo Cit	v School	District	60	
2. Billed Entity Number	£	unding Year July		through lune 20, 2010
4. Complete Mailing Address	ss of Billed Entity	inding rear July	1, 200	through June 30, 2010
Street Address, P.O. Box,			. 41.	
		315 W	llen	Street
City D. al. I.		State	Zip	Code
<u>tueblo</u>		<u>.</u>	<u>O</u>	81003
Telephone Number 719-549-7	292 Extension	Fax Numl	<sup>per</sup> 719 -	549-7281
5. Contact Person Information	tion			
Contact Person Name	Cassie 1	Nalgre	.n	
Street Address, P.O. Bo		م ملاید	, 1	
	315 W.	11th S	treet	
City C				
City Pueblo				
State Zip Code	01400			
	81003			
Check the box next to the pr Telephone Number	eferred mode of cor	tact. (At least or	ne box MUS	T be checked.)
	Extension	☐ Fax Nu		
719-549-7	1121	719	1-549	-7195
	. 1			
Cassandra	·walgren	o pueblo	LITYSC	hools.us
		3 6 0 1 0 1 0 3		

Entity Num	Entity Number 142321 Applicant's Form Identifier UNITE LAN				
Contact Pe					
Block 2: E	arly Filing Information and CIPA Waiver Requests				
	y Filing				
CHECK TH BEFORE JI	E BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING <b>ON OR</b> ULY 31 OF THE FUNDING YEAR.				
	The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.				
	Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.				
	A Waiver				
SECOND F	E BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE UNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU LED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.				
	I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.				
	A Waiver for Libraries for Funding Year 2004				
YEAR 2004	E BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE ES) REPRESENTED ON THIS FORM 486.				
	I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (I), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.				



	Entity Number 142321 Applicant's Form Identifier UNITE LAN  Contact Person Cassie Walgren Phone Number 719-549-7121						
Bloc	k 3: Service Info	ormation			4		
7.	lf you need	ed service provid Remer additional pages	ler may begin submitting involumer: The FRNs listed below n	Block 5 (Discount Funding Request) item for which ices to SLD. You will need your FCDL for some of the must be from the same Funding Year as is listed in B c, etc. and indicate the number in the space provided	e information required below.		
	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)		
2	696098	1913013	143029868	Unite Private Networks, LLC	07/01/2009		
3				,			
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12							



Entity Number 14232 Contact Person				
Block 4:Certifications and Signature				
8. I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology				

8. I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

Colorado Department of Education

9. I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



Entity Number _	142321	Applicant's Form Identifier \( \lambda \mathcal{N} \) \( \tau \)
Contact Person	Cassie Wa	gren Phone Number 719-549-7121

# 11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).
- pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:
- (FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.
- (FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(I) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.
- c. the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

# FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES 1:

- d. I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. Icertify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

# For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. l certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

<sup>1</sup> See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

The certification language above is not intended to fully set forth or explain all the requirements of the statute.



Page 5 of 7

FCC Form 486

0 4 8 6 0 1 0 6 0 3 Do Not Write In This Area

Entity Number	142321	Applicant's Form Identifier UNITE LAN
Contact Person	Cassie Wa	Gren Phone Number 719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person	13. Date ル、んり、09
14. Printed name of authorized person	
Dr. Robert Vise	
15. Title or position of authorized person	
Executive Director of Assessment	and Technology
16a. Street Address, P.O. Box, or Route Number	
315 W. 11th Street	
CityPueblo	
State CO Zip Code 81003	
16b. Telephone number of authorized person Extension 16c. Fax num	nber of authorized person
	9-549-7281
16d. Email address of authorized person	
robert. vise@pueblocity schools.us	



Entity Number _	1	12321	Applicant's For	m Identifier	NITE LAN
Contact Person	_(	assie Wa	lgren_	_ Phone Number	719-549-7121

# FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

## Please submit this form to:

SLD Form 486 P. O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100

# Exhibit 2

----- Forwarded message -----

From: **SLD Problem Resolution** <<u>SLD-Problem-Resolution@prod.vangent.com</u>>

Date: Wed, Nov 11, 2009 at 7:35 AM

Subject: E-Rate Problem Resolution; Form 486; Case # 21-962720, 21-962717, 21-962715 To: "cassandra.walgren@pueblocityschools.us" < 'cassandra.walgren@pueblocityschools.us' >

Date: 11/11/2009

Contact Name: Cassie Walgren

Applicant Name: Pueblo City School District 60

Contact Phone Number: 719-549-7121

Form Type: 486

Application Number(s): 630602

630622

630659

Applicant Form Identifier: 21-962720 UNITE LAN

21-962717 UNITE WAN

21-962715 MICRO TECH

Response Due Date: 11/18/2009

We recently sent a written request for additional information needed to successfully data enter your form. This is a reminder that the response due date is approaching. To date none of the requested information has been received. We need the following information from you so that we may complete data entry:

On these forms you listed the FRNs 1913013, 1848573, and 1912965 which are not funded. I will need for you to send me a request to cancel these forms.

Please make these corrections to your form and fax to my attention at 888-276-8736 or email the corrections to my attention at <a href="mailto:sld-problem-resolution@prod.vangent.com">sld-problem-resolution@prod.vangent.com</a>. Please reference the application number or form identifier and include your full name and title in all correspondences. If you have any questions, please call me at 888-203-8100 and reference Case Number 21-962720, 21-962717, and 21-962715.

We need to receive this information from you by 11/18/2009. Failure to do so may result in rejection of your form or removal of an incomplete line. If you need additional time to prepare your response, please let me know as soon as possible.

If you need to cancel your form or any individual lines, please clearly indicate in your response that it is your intention to cancel the form or line. Include in any cancellation request the form number and/or Form Identifier, the Funding Request Number(s), and the complete name, title and signature of the authorized individual.

NOTE: A copy of this correspondence is being forwarded to your State E-Rate Coordinator for informational purposes only. The State E-Rate Coordinator is under no obligation to get the information nor are they required to respond within the 15 days.

Thank you for your cooperation and continued support of the Universal Service Program.

# Megan Allred

Client Service Bureau / Problem Resolution

Schools and Libraries Division

Help Line: 888-203-8100

Fax: 888-276-8736

E-Mail: sld-problem-resolution@prod.vangent.com

--

Cassie Walgren Budget Supervisor Pueblo City Schools (719) 549-7121

# Exhibit 3



# Technology Department 315 W. 11th Street, Pueblo, CO 81003 (719) 549-7292

November 17, 2009

Schools and Libraries Division

FAX: 888-276-8736

Submitted by: Cassie Walgren

Applicant: Pueblo City School District 60 Billed Entity #: 142321

> Contact Name: Cassie Walgren Contact Phone: (719) 549-7121

Contact E-mail: <a href="mailto:cassandra.walgren@pueblocityschools.us">cassandra.walgren@pueblocityschools.us</a>

Case Numbers: 21-962720, 21-962717, 21-962715

# Dear Megan:

Please cancel the 486's submitted for FRN's **1913013**, **1848573** and **1912965**. The forms were inadvertently submitted before funding was approved.

Sincerely,

Cassie Walgren Accounting Supervisor

# Exhibit 4



1111/2



### FUNDING COMMITMENT DECISION LETTER (Funding Year 2009: 07/01/2009 - 06/30/2010)

December 8, 2009

Daniel Combs PUEBLO CITY SCHOOL DISTRICT 60 1920 Montezuma Road PUEBLO, CO 81003-2804

Re: Form 471 Application Number: 650387 Billed Entity Number (BEN): 142321 Billed Entity FCC RN: 0004235644 Applicant's Form Identifier: YR12WAN

Thank you for your Funding Year 2009 application for Universal Service Support and for any assistance you provided throughout our review. The current status of the funding request(s) in the Form 471 application cited above and featured in the Funding Commitment Report(s) (Report) at the end of this letter is as follows.

- The amount, \$170,505.06 is "Approved."

Please refer to the Report following this letter for specific funding request decisions and explanations. The Universal Service Administrative Company (USAC) is also sending this information to your service provider(s) so preparations can begin for implementing your approved discount(s) after you file FCC Form 486, Receipt of Service Confirmation Form. A guide that provides a definition for each line of the Report is available in the Reference Area of our website.

#### NEXT STEPS

- Work with your service provider to determine if you will receive discounted bills or if you will request reimbursement from USAC after paying your bills in full
- Review technology planning approval requirements

Review CIPA requirements File Form 486

- Invoice USAC using the Form 474 (service provider) or Form 472 (Billed Entity applicant) - as products and services are being delivered and billed

#### TO APPEAL THIS DECISION:

You have the option of filing an appeal with the SLD or directly with the Federal Communications Commission (FCC).

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
- 2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:

- Appellant name,

- Applicant name and service provider name, if different from appellant,
- Applicant BEN and Service Provider Identification Number (SPIN),
- Form 471 Application Number 650387 as assigned by USAC,
- "Funding Commitment Decision Letter for Funding Year 2009," AND

- The exact text or the decision that you are appealing.

- 3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to USAC by fax, fax your appeal to (973) 599-6542.

To submit your appeal to USAC on paper, send your appeal to:

Letter of Appeal Schools and Libraries Division - Correspondence Unit 100 S. Jefferson Road P.O. Box 902 Whippany, NJ 07981

If you wish to appeal a decision in this letter to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted in the Reference Area of our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

#### OBLIGATION TO PAY NON-DISCOUNT PORTION

Applicants are required to pay the non-discount portion of the cost of the products and/or services to their service provider(s). Service providers are required to bill applicants for the non-discount portion. The FCC stated that requiring applicants to pay their share ensures efficiency and accountability in the program. If USAC is being billed via the FCC Form 474, the service provider must bill the applicant at the same time it bills USAC. If USAC is being billed via the FCC Form 472, the applicant pays the service provider in full (the non-discount plus discount portion) and then seeks reimbursement from USAC. If you are using a trade-in as part of your non-discount portion, please refer to our website for more information.

# NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the Schools and Libraries Program. Applicants who have received funding commitments continue to be subject to audits and other reviews that USAC and/or the FCC may undertake periodically to assure that funds that have been committed are being used in accordance with all such requirements. USAC may be required to reduce or cancel funding commitments that were not issued in accordance with such requirements, whether due to action or inaction, including but not limited to that by USAC, the applicant, or the service provider. USAC, and other appropriate authorities (including but not limited to the FCC), may pursue enforcement actions and other means of recourse to collect improperly disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

Schools and Libraries Division Universal Service Administrative Company

# FUNDING COMMITMENT REPORT Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60 BEN: 142321

Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 650387
Funding Request Number: 1848573
Funding Status: Funded
Category of Service: Telecommunications Service
Form 470 Application Number: 197380000475497
SPIN: 143029868
Service Provider Name: Unite Private Networks, LLC
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/27/2004
Contract Expiration Date: 06/30/2019
Shared Worksheet Number: 1054256
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$207,933.00
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$207,933.00
Discount Percentage Approved by the USAC: 82%
Funding Commitment Decision: \$170,505.06 - FRN approved as submitted

FCDL Date: 12/08/2009 Wave Number: 031

Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010



### FUNDING COMMITMENT DECISION LETTER (Funding Year 2009: 07/01/2009 - 06/30/2010)

December 8, 2009

Daniel Combs PUEBLO CITY SCHOOL DISTRICT 60 1920 Montezuma Road Pueblo, CO 81003

Re: Form 471 Application Number: 696098 Billed Entity Number (BEN): 142321 Billed Entity FCC RN: 0004235644

Applicant's Form Identifier: 09-14internalmain

Thank you for your Funding Year 2009 application for Universal Service Support and for any assistance you provided throughout our review. The current status of the funding request(s) in the Form 471 application cited above and featured in the Funding Commitment Report(s) (Report) at the end of this letter is as follows.

- The amount, \$232,935.05 is "Approved."

Please refer to the Report following this letter for specific funding request decisions and explanations. The Universal Service Administrative Company (USAC) is also sending this information to your service provider(s) so preparations can begin for implementing your approved discount(s) after you file FCC Form 486, Receipt of Service Confirmation Form. A guide that provides a definition for each line of the Report is available in the Reference Area of our website.

#### NEXT STEPS

- Work with your service provider to determine if you will receive discounted bills or if you will request reimbursement from USAC after paying your bills in full
- Review technology planning approval requirements

Review CIPA requirements

- File Form 486
- Invoice USAC using the Form 474 (service provider) or Form 472 (Billed Entity applicant) - as products and services are being delivered and billed

#### TO APPEAL THIS DECISION:

You have the option of filing an appeal with the SLD or directly with the Federal Communications Commission (FCC).

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
- 2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
  - Appellant name,

- Applicant name and service provider name, if different from appellant,
- Applicant BEN and Service Provider Identification Number (SPIN),
- Form 471 Application Number 696098 as assigned by USAC,
- "Funding Commitment Decision Letter for Funding Year 2009," AND

- The exact text or the decision that you are appealing.

- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to USAC by fax, fax your appeal to (973) 599-6542.

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Letter of Appeal Schools and Libraries Division - Correspondence Unit 100 S. Jefferson Road P.O. Box 902 Whippany, NJ 07981

If you wish to appeal a decision in this letter to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted in the Reference Area of our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

#### OBLIGATION TO PAY NON-DISCOUNT PORTION

Applicants are required to pay the non-discount portion of the cost of the products and/or services to their service provider(s). Service providers are required to bill applicants for the non-discount portion. The FCC stated that requiring applicants to pay their share ensures efficiency and accountability in the program. If USAC is being billed via the FCC Form 474, the service provider must bill the applicant at the same time it bills USAC. If USAC is being billed via the FCC Form 472, the applicant pays the service provider in full (the non-discount plus discount portion) and then seeks reimbursement from USAC. If you are using a trade-in as part of your non-discount portion, please refer to our website for more information.

#### NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the Schools and Libraries Program. Applicants who have received funding commitments continue to be subject to audits and other reviews that USAC and/or the FCC may undertake periodically to assure that funds that have been committed are being used in accordance with all such requirements. USAC may be required to reduce or cancel funding commitments that were not issued in accordance with such requirements, whether due to action or inaction, including but not limited to that by USAC, the applicant, or the service provider. USAC, and other appropriate authorities (including but not limited to the FCC), may pursue enforcement actions and other means of recourse to collect improperly disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

Schools and Libraries Division Universal Service Administrative Company

# FUNDING COMMITMENT REPORT Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60 BEN: 142321

Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 696098
Funding Request Number: 1912965
Funding Status: Funded
Category of Service: Basic Maintenance of Internal Connection
Form 470 Application Number: 952710000653309
SPIN: 143010971
Service Provider Name: Microtech-Tel
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/18/2008
Contract Expiration Date: 06/30/2013
Shared Worksheet Number: 1137501
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$30,110.88
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$30,110.88
Discount Percentage Approved by the USAC: 90%
Funding Commitment Decision: \$27,099.79 - FRN approved as submitted

FCDL Date: 12/08/2009 Wave Number: 031

Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010

# FUNDING COMMITMENT REPORT Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60 BEN: 142321 Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 696098
Funding Request Number: 1913013
Funding Status: Funded
Category of Service: Basic Maintenance of Internal Connection
Form 470 Application Number: 952710000653309
SPIN: 143029868
Services Previder Name: United Private Networks, LLC SPIN: 143029868
Service Provider Name: Unite Private Networks, LLC
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/18/2008
Contract Expiration Date: 06/30/2013
Shared Worksheet Number: 1137501
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$228,705.84
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$228,705.84
Discount Percentage Approved by the USAC: 90%
Funding Commitment Decision: \$205,835.26 - FRN approved as submitted

FCDL Date: 12/08/2009
Wave Number: 031
Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010



Schools and Libraries Division Correspondence Unit 100 South Jefferson Road P.O. Box 902 Whippany, NJ 07981

# TIME SENSITIVE MATERIAL

00259 Daniel Combs PUEBLO CITY SCHOOL DISTRICT 60 1920 Montezuma Road Pueblo, CO 81003

# Exhibit 5



Unite WAN FRN# 1848573

Schools and Libraries Division

URGENT REMINDER: YOUR FORM 486 MAY BE LATE (Funding Year 2009: 07/01/2009 - 06/30/2010)

Date: April 13, 2010

Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
PUEBLO, CO 81003-2804

RE: Billed Entity Number: 142321 Form 471 Application Number: 650387

This letter is a reminder that you may have missed the deadline for submitting and certifying your FCC Form 486, Receipt of Service Confirmation Form, based on your FCDL Date and the Service Start Date indicated on your FCC Form 471, Block 5 Discount Funding Request(s).

You have 20 days from the date of this letter to submit and certify your Form(s) 486 with no penalty, if your services did start at least 120 days before the above date.

If you fail to submit and certify your Form 486 by 05/03/2010 your Service Start Date may be adjusted once you submit and certify your Form 486. USAC may reduce your commitment for recurring services if your Service Start Date is adjusted.

THIS IS YOUR ONLY REMINDER. If your services have not yet started or have started within the last 120 days, Your Form 486 MUST BE POSTMARKED OR SUBMITTED ONLINE WITHIN 120 DAYS OF YOUR SERVICE START DATE.

Following this letter is a Form 486 Reminder Report (Report) that lists the Funding Request Number(s) for which either a Form 486 has not been submitted or a Form 486 has been submitted online, but not certified.

Form 486 is available in the Apply Online area of our website at www.usac.org/sl. We recommend that you use the Deadline Tool on our website to check the Form 486 deadlines for specific FRNs and other Program deadlines.

Complete Program information is available on our website. You may also contact our Client Service Bureau via email using the "Submit a Question" feature on our website, toll-free via fax at 1-888-276-8736 or toll-free via phone at 1-888-203-8100.

Schools and Libraries Division Universal Service Administrative Company

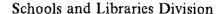
### Form 486 Reminder Report Form 471 650387

We have not received your completed Form 486 and certifications - either online or on paper.

Funding Request Numbers(s)

1848573

00003





URGENT REMINDER: YOUR FORM 486 MAY BE LATE (Funding Year 2009: 07/01/2009 - 06/30/2010)

Date: April 13, 2010

Daniel Combs PUEBLO CITY SCHOOL DISTRICT 60 1920 Montezuma Road Pueblo, CO 81003

RE: Billed Entity Number: 142321

Form 471 Application Number: 696098

This letter is a reminder that you may have missed the deadline for submitting and certifying your FCC Form 486, Receipt of Service Confirmation Form, based on your FCDL Date and the Service Start Date indicated on your FCC Form 471, Block 5 Discount Funding Request(s).

You have 20 days from the date of this letter to submit and certify your Form(s) 486 with no penalty, if your services did start at least 120 days before the above date.

If you fail to submit and certify your Form 486 by 05/03/2010 your Service Start Date may be adjusted once you submit and certify your Form 486. USAC may reduce your commitment for recurring services if your Service Start Date is adjusted.

THIS IS YOUR ONLY REMINDER. If your services have not yet started or have started within the last 120 days, YOUR FORM 486 MUST BE POSTMARKED OR SUBMITTED ONLINE WITHIN 120 DAYS OF YOUR SERVICE START DATE.

Following this letter is a Form 486 Reminder Report (Report) that lists the Funding Request Number(s) for which either a Form 486 has not been submitted or a Form 486 has been submitted online, but not certified.

Form 486 is available in the Apply Online area of our website at www.usac.org/sl. We recommend that you use the Deadline Tool on our website to check the Form 486 deadlines for specific FRNs and other Program deadlines.

Complete Program information is available on our website. You may also contact our Client Service Bureau via email using the "Submit a Question" feature on our website, toll-free via fax at 1-888-276-8736 or toll-free via phone at 1-888-203-8100.

Schools and Libraries Division Universal Service Administrative Company

#### Form 486 Reminder Report Form 471 696098

We have not received your completed Form 486 and certifications - either online or on paper.

Funding Request Numbers(s)

1912965 1913013

00076

# Exhibit 6

2nd 486

Micro Tech tel Page 1 of 1

FCC Form 486

Do Not Write In This Area

FRN 1912965

Application ID **Entity Number**  813396

142321

Applicant's Form Identifier

Micro-2010

**Contact Person** 

Cassie Walgren

**Phone Number** 

719-549-7121

I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

12. Signature of authorized person

13. Date

10/9/2010 1:49:13 PM

14. Printed name of authorized person

Daniel E. Combs

15. Title or position of authorized person

Director of Technology

16a. Street Address, P.O. Box, or Route Number

1920 Montezuma Road

City

Pueblo

State

Zip Code

81003 -

16b. Telephone number of authorized person

Extension

16c. Fax number of authorized person

719-549-7292

719-253-6080

16d. Email address of authorized person

daniel.combs@pueblocityschools.us

Please submit this form to:

SLD Form 486

Lawrence, Kansas 66044-7026

471#

696098

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100



Page 7 of 7

FCC Form 486

PrintPreview Page 1 of 8

FCC Form 486	Do Not Write in this	Area		Approval by OMB 3060-0853 Estimated time ponse: 1.5 hours
		aries Universal Service Confirmation For		
To be completed by the Billed Entity Please reed instructions before completing.		(You c	an also file online at www.usac.org	ı/sl.)
Applicant's Form Identifier Micro-2010		Form 486 Appl	ication#: 813396	
(Create your own code to identify THIS Form 486)		englase ed oT)	d by administrator)	
Block 1: Billed Entity Information		•		
1. Name of Billed Entity				
PUEBLO CITY SCHOOL DISTRICT 60				
2. Billed Entity Number 142321	3. Funding Year July	1, 2009	through June 30,	2010
4. Complete Mailing Address of Billed Entity Street Address, P.O. Box, or Roule Number	315 W 11TH ST			
		, ,		
City	···×··································	State	Zip Code	
PUEBLO		co	81003 -	2804
Telephone Number 719-549-7100	xtension	Fax Number	719-549-7281	······································
5. Contact Person Information  Contact Person Nama Cassie Walgren			<u> </u>	***************************************
Street Address, P.O. Box or Route Number 315 W. 11th Street				
		· · · · · · · · · · · · · · · · · · ·		
Cily Puebio				
State Zip Code	e 81003 -			
Check the box next to the preferred mode of contect, Telephone Number Extensio 719-549-7121		checked.)	ber 719-549-7114	
Email Address cassandra.walgren@puebl	ocityschools.us			



Page 1 of 7 FCC Form 486 April 2007 **PrintPreview** Page 2 of 8

Entity Number	142321	Applicant's Form Identifier	Micro-2010			
Contact Perso	n Cassie Walgron	Phone Number	719-549-7121			
Block 2: E	arly Filing Information and CIPA Waiver Re	quests				
6a. Early Filing	1					
	OX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVI 31 OF THE FUNDING YEAR.	CES STARTING ON OR				
Π,	The Funding Requests listed in Block 3 have been approved by Commitment Decision Letter (FCDL), I have confirmed with the those Funding Requests that these services will start on or before the confirmed requests that these services will start on or before the confirmed requests that these services will start on or before the confirmed requests that these services will start on or before the confirmed requests that these services will start on or before the confirmed requests.	service provider(s) featured in				
	Remember: Early filing using Item 5a is an option if and ONL month of July of the relevant Funding Year, all relevant certifications accurately made, and the Form 486 is postmarked on or befo	cations in Block 4 can be				
6b. CIPA Walve	9°					
SECOND FUND	DX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA RE DING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPL DENTITY ARE THE ADMINISTRATIVE AUTHORITY.	DUIREMENTS FOR THE IED FOR DISCOUNTS IF YOU				
	Lam providing notification that, as of the date of the start of disc make the certifications required by the Children's Internet Protet 254(h) and (f), because my state or local procurement roles or a requirements prevent the making of the certification(s) otherwise schools or libraries represented in the Funding Request Number brought into compliance with the CIPA requirements before the after April 20, 2001 in which they apply for discounts.	stion Act, as codified at 47 U.S.C. § sgulations or competitive bidding e required. I certify that the (s) on this Form 486 will be				
6c, CIPA Wai	6c. CIPA Waiver for Libraries for Funding Year 2004					
YEAR 2004 IF	BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA RE YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUT REPRESENTED ON THIS FORM 486.	EQUIREMENTS FOR FUNDING HORITY FOR THE				
	I am providing notification that, as of the date of the start of discr. 2004, I am unable to make the certifications required by the Chill codified at 47 U.S.C. § 254(h) and (f), because my state or local or competitive bidding requirements prevent the making of the occurrify that the libraries represented in the Funding Request Numbrought into compliance with the CIPA requirements before the starting that the compliance with the CIPA requirements.	dren's Internet Protection Act, as procurement rules or regulations artification(s) otherwise required. ( abor(s) on this Form 486 will be				



FCC Form 486

April 2007

Page 2 of 7

Entity Number	142321	Applicant's Form Identifier	Micro-2010		
Contact Person	Cassie Walgren	Phone Number	718-548-7121		
Block 3: Service Information					
7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) Hem for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.					
		e from the same Funding Year as is listed in Block 1, its			
tf var	i naad additlanal aanae intanaa lahal ihaa di	an annua sett ni vadenua adt atealiemi ban ata 🕰 🖒 🖊	uždad bases		

(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL		(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
696098	1912965	143010971	Microtech-Tel	7/1/2009



Page 3 of 7

FCC Form 486

April 2007

Page 3\_

Entity Numb	per 142321	Applicant's Form Identifier	Micro-2010
Contact Per	son Cassie Weigren	Phone Number	719-549-7121
Block 4:0	ertifications and Signature		
8. Ø	I certify that the entity(liss) receiving discounted services as indice state or other authorized body ? a USAC-certified technology plat funding year. If applicable, provide the neme(s) of the organization covered under this Form 486. If EVERY FRN listed in the Form 4	n approver? prior to the commencement of service and onts) that approved a technology plan for any eligible en	that cover all 12 months of the tity that is receiving services
Colorado D	repartment of Education - CDE		
9. 🟹	I certify that the services listed on this Form 496 have been, are p. Form 471 application(s) cited above. I certify that there are signed provided on a teriff or month-to-month basis. I certify that I am au Billed Entity; that I have examined this request; and that, to the betrue.	d contracts covering all of the services listed on this For thorized to submit this receipt of service confirmation or	m 486 except for those services to behalf of the above-named
10. 🔽	I understand that the discount level used for shared services is co- libraries that are treated as sharing in the services receive an app pursuant to this application and will retain for five years any and a and, if audited, will make available to the Administrator such reco-	propriate share of benefits from those services. I recogn all records, including Forms 479 where required, that if n	ize that I may be audited
only ONE i Authorities Administra checks ite	R COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed E fem. If the Billed Entity is not the Administrative Authority, ski must check item 11d or 11e. (See the Form 486 instructions fully Authorities.") A Billed Entity who represents one or more in 11d must check item 11f or 11g. (See the Form 486 instructive Authorities.")	lp to item 11d. A Billed Entity who represente one o for Item 11, "Special Notes for Billed Entities Who R Administrative Authorities in Funding Years after I	r more Administrative epresent One or More Funding Year 2001 and who
	IF THIS FORM PERTAINS TO A FUNDING YEAR PRI TO ITEM 12.	IOR TO FUNDING YEAR 2001 (THE FUNDING YEAR	BEGINNING JULY 1, 2001), SKIF



FCC Form 486

April 2007

Page 4 of 7

Entity Number	142321	Applicant's Form Identifier	Micro-2010			
Contact Person	Cassle Walgren	Phone Number	719-649-7121			
11. FOR A BILL	ED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:					
f certify	y that as of the date of the start of discounted services:	•				
a. 💟	the recipient(s) of service represented in the Funding Reque complied with the requirements of the Children's Internet Pri and (I).					
b. [	pursuant to the Children's Internet Protection Act, as codific service represented in the Funding Request Numbor(s) on t	d at 47 U.S.C. § 254(h) and (i), the reciplent(s) of his Form 486:				
(FOR s	SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YE. undertaking such actions, including any necessary procuremer requirements of CIPA for the next funding year, but has (have) this funding year.	it procedures, to comply with the				
(FOR I	FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECON PURPOSES OF CIPA) is (are) in compliance with the requirem undertaking such actions, including any necessary procuremer requirements of CIPA under 47 U.S.C. § 254(h) for the next fur	ents of CIPA under 47 U.S.C. § 254(I) and it procedures, to comply with the				
с. 🗀	the Children's Internet Protection Act, as codified at 47 U.S.C. recipient(s) of service represented in the Funding Request Nurdiscount services only for telecommunications services.	§ 254(h) end (l), does not apply because the nber(s) on this Form 486 is (are) receiving				
FOR A BIL	LED ENTITY WHO REPRESENTS ONE OR MORE ADMINIST	TRATIVE AUTHORITIES 1:				
<b>d</b> .	I certify as the Billed Entity for the consortium that I have col from all eligible members of the consortium.	ected duly completed and signed Forms 479				
<b>6</b> .	Leartify as the Billed Enlity for the consortium that the only sunder the universal service support mechanism on behalf of telecommunications services, and therefore the requirement codified at 47 U.S.C. § 254(h) and (i), do not apply.	oligible members of the consertium are				
For Fundin	g Years after Funding Year 2001: If you checked Item 11d a	bove, check ONE of the boxes below:				
t. [	I certify that some or all of the eligible consortium members of CIPA Waiver, and upon request from the Administrator I can	checked Form 479 Item 6d or Item 6e to seek a provide this information; OR				
9.	I certify that no eligible consortium members checked Form	179 Item 6d or Item 6e to seek a CIPA Weiver.				
The	The certification language above is not intended to fully set forth or explain all the requirements of the statute.					
l See Adr	See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."					
	The certification language above is n	ot intended to fully set forth or explain all the requ of the statute.	irements			

Page 5 of 7

FCC Form 486

FCC Form 486

Do Not Write In This Area

Entity Number	742321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Watgron	Phone Number	719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfolture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person		13. Dato
· · · · · · · · · · · · · · · · · · ·	W1817A 10000 A 100 A	Marienta
14. Printed name of authorized person		
Danief £. Combs		
15. Title or position of authorized person		
Director of Technology		
16a. Street Address, P.O. Box, or Route Number		
1920 Monlezuma Road		
City		
Pueblo		!
State CO Zip Code	81003 -	
16b. Telephone number of authorized person	Extension	16c. Fax number of authorized person
719-549-7292		719-253-6080
16d. Estail address of authorized person		
danial.combs@pueblocilyschools.us		



Page 6 of 7

FCC Form 486

Entity Number 142321 Applicant's Form Identifier Micro-2010 Contact Person Cassio Walgren Phone Number 719-549-7121

#### FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form, Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federat Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3050-0953), Weshington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 868-203-8100



Page 7 of 7

FCC Form 486

2nd 488

Unite

Page 1 of 1

FCC Form

Do Not Write In This Area

Approval by OMB 3060-0853

Application ID:

813397

girjenie

142321

Applicant's Form Identifier

Unite2010

Entity Number
Contact Person

Cassie Walgren

**Phone Number** 

719-549-7121

Tcertify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

12. Signature of authorized person

13. Date

10/9/2010 1:55:01 PM

14. Printed name of authorized person

Daniel E. Combs

15. Title or position of authorized person

Director of Technology

16a. Street Address, P.O. Box, or Route Number

1920 Montezuma Road

City

Pueblo

State

Zip Code

81003 -

16b. Telephone number of authorized person

Extension

16c. Fax number of authorized person

719-549-7292

719-253-6080

16d. Email address of authorized person

daniel.combs@pueblocityschools.us

Please submit this form to:

SLD Form 486 P. O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100 471# 696098 ~ LAN 1913013 650387 - WAN 1848573



0486010603

Page 7 of 7

FCC Form 486

FCC Form 486		Do Not Write in this	Area		Approval by OM8 3060-0853 Estimated time per response: 1.5 hours
	7		aries Universal Serv ce Confirmation For		
To be completed by the Billed Entity Please read instructions before completing.			(You c	an also file online al www.u	sac.org/sl.)
Applicant's Form Identifier Unite2010	0		Form 486 Appl	ication#: 613397	
(Create your own code to identify THIS Form 486	6)		englese ad oT)	d by administrator)	
Block 1: Billed Entity Informatio	)1 <u>1</u>				
1. Name of Billed Entity					
PUEBLO CITY SCHOOL DISTRICT 60					
2. Billed Entity Number 142321		3. Funding Year July	1, 2009	through June 30	, 2010
4, Complete Mailing Address of Billed Entity Street Address, P.O. Box, or Route Number		315 W 117H ST		· · · · · · · · · · · · · · · · · · ·	
City			State	Zip Code	
PUEBLO			co	8	1003 - 2804
Telephone Number 719-549-7100	Extension	on	Fax Number	719-549-7281	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6. Contact Person Information  Contact Person Name Cassie Walgre	ən				
Street Address, P.O. Box or Route Number 315 W. 11th Street					
City				*****	
Pueblo					
State CO	Zlip Code	81003 -			
Check the box next to the preferred mode of co	ontact. (At les	ist one box MUST be	checked.)		
Telephone Number 719-549-7121	Extension		Fax Num	ber 719-549-7114	
Email Address cassandra.walgren	n@pueblocitysc	chools.us			



Page 1 of 7

FCC Form 486

Entity Number	142321	Applicant's Form Identifier	Unite2010			
Contact Perso	n Cassie Walgren	Phone Number	719-549-7121			
Block 2: E	arly Filing Information and CIPA Waiver Re	quests				
6a. Early Filing						
	OX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVI 31 OF THE FUNDING YEAR.	DES STARTING ON OR				
C '	The Funding Requests listed in Block 3 have been approved by Commitment Decision Letter (FCDL). I have confirmed with the those Funding Requests that these services will start on or before the confirmed with the confirmed representation of the confirmed	service provider(s) featured in				
	Remember: Early filing using Item 6a is an option if and ONL month of July of the relevant Funding Year, all relevant certificaccurately made, and the Form 486 is postmarked on or before the contract of the	cations in Block 4 can be				
6b, CIPA Walvo	97					
SECOND FUND	OX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REC DING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPL DENTITY ARE THE ADMINISTRATIVE AUTHORITY.					
	I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required: Lortify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.					
6c. CIPA Wal	ver for Libraries for Funding Year 2004					
YEAR 2004 IF	BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA RI YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUT REPRESENTED ON THIS FORM 486.	EQUIREMENTS FOR FUNDING HORITY FOR THE				
	I am providing notification that, as of the date of the start of disco 2004, I am unable to make the certifications required by the Chit codified at 47 U.S.C. § 254(h) and (i), because my starte or local or competitive bidding requirements prevent the making of the or certify that the libraries represented in the Funding Request Nun brought into compliance with the CIPA requirements before the a	dren's Internet Protection Act, as procurement rules or regulations artification(s) otherwise required. I aber(s) on this Form 486 will be				



FCC Form 486

April 2007

Page 2 of 7

Entity Number	142321	Applicant's Form Identifier	Unito2010		
Contact Person	Cassie Walgren	Phone Number	719-549-7121		
Block 3: Service Information					
7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information					
raquired below. Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, item 3. If you need additional pages, please labol them 4A, 4B, 4C, atc. and indicate the number in the space provided here:					
			Page 3		

(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	\$	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
696098	1913013	H /CAT /OXAX	Unite Private Networks, LLC	7/1/2009
650387	1848573	13713(17V)X/SX	Unite Private Networks, LLC	7/1/2009



Page 3 of 7

FCC Form 486

Entity Num	ber	142321	Applicant's Form Identifier	Unite2010		
Contact Person		Cassle Walgren	Phone Number	719-549-7121		
Block 4:	lock 4:Certifications and Signature					
8. [7]	state or other authorize funding year. If applica	es) receiving discounted services as Indicated on id body ? a USAC-certified technology plan appro- ble, provide the name(s) of the organization(s) the m 486. If EVERY FRN listed in the Form 486 is for	ver ? prior to the commencement of service and t t approved a technology plan for any eligible enti	hat cover all 12 months of the ly that is receiving services		
Colorado	Department of Education	- CDE				
				:		
9.	Form 471 application(s) provided on a tariff or m	s listed on this Form 486 have been, are planned) cited above. I certify that there are signed contra tonth-to-month basis. I certify that I am authorized examined this request; and that, to the bost of m	cts covering all of the services listed on this Form to submit this receipt of service confirmation on	. 486 except for those services behalf of the above-named		
10. 📝	libraries that are treated pursuant to this applicat	scount level used for shared services is conditions as sharing in the services receive an appropriate tion and will retain for five years any and all record a available to the Administrator such records.	share of benefits from those services. I recognize	e that I may be audited		
only ONE Authoritie Administr checks ite	NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Chec only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11c. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")					
	IF THIS FOR TO ITEM 12.	M PERTAINS TO A FUNDING YEAR PRIOR TO	FUNDING YEAR 2001 (THE FUNDING YEAR E	EGINNING JULY 1, 2001), SKIF		



FCC Form 486

April 2007

Page 4 of 7

Entity Number	142321	Applicant 5 Form Identifier	GIMBEOTO				
Contact Person	Cassle Walgren	Phone Number	719-549-7121				
14. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:							
11. FUR A BILL	. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:						
I certify	I certify that as of the date of the start of discounted services:						
a. 💟	the recipient(s) of service represented in the Funding Rec compiled with the requirements of the Children's Internet and (I).						
ь. 🗀	pursuant to the Children's Internet Protection Act, as codi service represented in the Funding Request Number(s) or	ied at 47 U.S.C. § 254(h) and (l), the recipient(s) of this Form 498:					
(FOR S	SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING Y undertaking such actions, including any necessary procurem requirements of CIPA for the next funding year, but has (hav this funding year.	ent procedures, to comply with the					
(FOR I	FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SEC PURPOSES OF CIPA) is (are) in compliance with the require undertaking such actions, including any necessary procurem requirements of CIPA under 47 U.S.C. § 254(h) for the next	ements of CIPA under 47 U.S.C. § 254(f) and end end procedures, to comply with the					
с. []	the Children's Internet Protection Act, as codified at 47 U.S. recipient(s) of service represented in the Funding Request N discount services only for telecommunications services.	C. § 254(h) and (i), does not apply because the umber(s) on this Form 486 is (are) receiving					
FOR A BIL	LED ENTITY WHO REPRESENTS ONE OR MORE ADMINI	STRATIVE AUTHORITIES 1:					
d. [	I certify as the Billed Entity for the consortium that I have a from all eligible members of the consortium.	ollected duly completed and signed Forms 479					
o. []	I certify as the Billed Entity for the consortium that the only under the universal service support mechanism on behalf (elecommunications services, and therefore the requireme codified at 47 U.S.C. § 254(h) and (f), do not apply.	of eligible members of the consortium are					
For Fundin	g Years after Funding Year 2001: If you checked item 110	above, check ONE of the boxes below:					
f.	f certify that some or all of the eligible consortium member CIPA Waiver, and upon request from the Administrator I co	s checked Form 479 llem 6d or llem 6e to seek a an provide this information; OR					
g	I certify that no eligible consortlum members checked Form	n 479 Item 6d or Item 6e to seek a CIPA Weiver.					
The	certification language above is not intended to fully set forth	or explain all the requirements of the statute.					
¹ See Adn	the Form 486 Instructions for Item 11, "Special Notes for Bill ninistrative Authorities."	ed Entities Who Represent One or More					
	The certification language above is	not intended to fully set forth or explain all the re of the statute,	quiroments				

Page 5 of 7

FCC Form 486

FCC Form 486 Do Not Write In This Area

Entity Number	142321	Applicant's Form Identifier Unito2010			
Contact Person	Cassie Wałgren	Phone Number	719-549-7121		

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

 12. Signa	ature of au	ithorized perso	n			13. Date	۰
				***************************************			
14. Printe	ed name o	f authorized po	rson				
	Daniel E.	Combs					
15. Title	or position	of authorized	person				
	Director o	f Technology					
16a. Strø	et Addres	s, P.O. Box, or	Route Number				
	1920 Mon	tezuma Road					
	City						
	Pueblo						
	State	co	Zip Code	81003 -			
16b. Tela	phone nui	mbor of authori	zed person		Extension	16c. Fax number of authorized person	
719-546	9-7292					719-253-6080	
16d. Ema	il address	of authorized p	oerson				
daniel.c	ombs@pu	eblocityschools.u	15				



FCC Form 486

April 2007

Page 6 of 7

**Entity Number** 142321 Unite2010 Applicant's Form Identifier Contact Person Cassio Walgren 719-549-7121 Phone Number

#### FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the The public reporting for this collection of information is estimated to large from 1 to 2 hours per response, including the fine for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@(cc.gov PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you will this notice. This collection has been assigned an OMB control number of 3060-0653.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 5528(6)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486 P. O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms ATTN: SLD Form 486 3833 Greenway Drive Lawrence, Kansas 66046 888-203-8100



Page 7 of 7

FCC Form 486

# Exhibit 7





## TIME SENSITIVE MATERIAL

00031 Cassie Walgren PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003





# FORM 486 NOTIFICATION LETTER (Funding Year 2009: 07/01/2009 - 06/30/2010)

October 27, 2010

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003

Re: Form 486 Application Number: 813397

Applicant's Form 486 Identifier: Unite2010

This letter is to notify you that the Universal Service Administrative Company (USAC) has received and accepted an FCC Form 486, Receipt of Service Confirmation Form, from you. This notification is to confirm the information that you provided. This information is being shared with the service provider whose SPIN you identified on each Funding Request Number (FRN).

You may be receiving this letter to revise or correct a previous Form 486 Notification Letter. The information contained in this letter supersedes any previous notification you may have received, including, but not limited to, a previously adjusted Service Start Date or previously reduced funding commitment.

#### NEXT STEPS

Discuss with your service provider whether you would like discounts on your bills or to pay your bills in full and be reimbursed for discounts.

Invoice USAC before the invoice deadline using the applicant invoice (BEAR Form - FCC Form 472) for reimbursements after paying the bills in full or the service provider invoice (SPI Form - FCC Form 474) for discounts. Whichever method you choose, you must pay your non-discount portion, as stated in Program rules. Program rules also require that participants maintain all documentation for at least five years after delivery of discount service.

#### TO APPEAL THE SERVICE START DATE/FUNDING COMMITMENT CHANGE DECISION

If you wish to appeal the Service Start Date change(s) and/or funding commitment adjustment(s) indicated in this letter, your appeal must be received by USAC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.

State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:

- appellant name,

- applicant or service provider name, if different than appellant,

- applicant BEN and service provider SPIN,
   Form 486 Number 813397 and FRN(s) as assigned by USAC,
   "Form 486 Notification Letter for Funding Year 2009", AND - the exact text or the decision that you are appealing.
- 3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by the USAC s decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by the USAC s decision.
- Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to us by fax, fax your appeal to (973) 599-6542.

To submit your appeal to us on paper, send your appeal to:

Letter of Appeal Schools and Libraries Division - Correspondence Unit 100 South Jefferson Road P.O. Box 902 Whippany, NJ 07981

You have the option of filing an appeal with USAC or directly with the Federal Communications Commission (FCC). You should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

A guide to the data reported in our letter reports is posted in the Reference Area of our website. Complete Program information, including invoice deadlines is also posted on our website. You may also contact our Client Service Bureau by email using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736, or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division Universal Service Administrative Company

AP486NL/Schools and Libraries/USAC

Page 2 of 3

10/27/2010

#### FORM 486 NOTIFICATION LETTER REPORT (Funding Year 2009)

Funding Request Number: 1848573
Form 471 Application Number: 650387
Service Provider Name: Unite Private Networks, LLC
Service Provider Identification Number: 143029868

Billing Account Number: N/A
Service Start Date: 06/16/2010\*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$14,208.75

Funding Request Number: 1913013
Form 471 Application Number: 696098
Service Provider Name: Unite Private Networks, LLC
Service Provider Identification Number: 143029868

Billing Account Number: N/A
Service Start Date: 06/16/2010\*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE

Adjusted Funding Commitment: \$17,152.94



AP486NL/Schools and Libraries/USAC

Page 3 of 3

10/27/2010





# TIME SENSITIVE MATERIAL

00030 Cassie Walgren PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003





#### FORM 486 NOTIFICATION LETTER (Funding Year 2009: 07/01/2009 - 06/30/2010)

October 27, 2010

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003

Form 486 Application Number: 813396 Applicant's Form 486 Identifier: Micro-2010

This letter is to notify you that the Universal Service Administrative Company (USAC) has received and accepted an FCC Form 486, Receipt of Service Confirmation Form, from you. This notification is to confirm the information that you provided. This information is being shared with the service provider whose SPIN you identified on each Funding Request Number (FRN).

You may be receiving this letter to revise or correct a previous Form 486 Notification Letter. The information contained in this letter supersedes any previous notification you may have received, including, but not limited to, a previously adjusted Service Start Date or previously reduced funding commitment.

#### NEXT STEPS

Discuss with your service provider whether you would like discounts on your bills or to pay your bills in full and be reimbursed for discounts.

Invoice USAC before the invoice deadline using the applicant invoice (BEAR Form - FCC Form 472) for reimbursements after paying the bills in full or the service provider invoice (SPI Form - FCC Form 474) for discounts. Whichever method you choose, you must pay your non-discount portion, as stated in Program rules. Program rules also require that participants maintain all documentation for at least five years after delivery of discount service.

### TO APPEAL THE SERVICE START DATE/FUNDING COMMITMENT CHANGE DECISION

If you wish to appeal the Service Start Date change(s) and/or funding commitment adjustment(s) indicated in this letter, your appeal must be received by USAC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

 Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.

2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:

appellant name,

- applicant or service provider name, if different than appellant,
   applicant BEN and service provider SPIN,
   Form 486 Number 813396 and FRN(s) as assigned by USAC,
   "Form 486 Notification Letter for Funding Year 2009", AND - the exact text or the decision that you are appealing.
- 3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by the USAC s decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by the USAC s decision.
- Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

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Schools and Libraries Division Universal Service Administrative Company

AP486NL/Schools and Libraries/USAC

Page 2 of 3

10/27/2010

#### FORM 486 NOTIFICATION LETTER REPORT (Funding Year 2009)

Funding Request Number: 1912965
Form 471 Application Number: 696098
Service Provider Name: Microtech-Tel
Service Provider Identification Number: 143010971
Billing Account Number: N/A
Service Start Date: 06/16/2010\*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$2,258.31



AP486NL/Schools and Libraries/USAC

Page 3 of 3

10/27/2010

# Exhibit 8

FCC Form 472 Do not write in this space.

Approval by OMB 3060 – 0856 Estimated time per response: 1.5 hours

## Universal Service for Schools and Libraries

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

# BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the

## FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@foc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember — You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0856.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552±(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)	\$31,361.69	<del></del>
7. Reimbursement Date to USAC	11/3/10	·
6. Reîmbursement Form Number	Unite-2	
5. Contact Telephone Number	719-549-7121	<del></del>
4. Contact Name	Cassie Walgren	
Service Provider Identification Number (SPIN)	143029868	
2. 471 Billed Entity Number	142321	
1. 471 Billed Entity Name	Pueblo City School District 60	
BLOCK 1: HEADER INFORMATION		

	Billed Entity Applicant Reimbursement Form  For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.						
47	471 Billed Entity Name Pueblo City School District 60 471 Billed Entity Number 142321						
C	Contact Name Cassie Walgren Contact Telephone Number						
	eimbursement Form	Number \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	te-2				
ㅂ	LOCK 2: LINE ITE	M INFORMATION	PER FUNDING R	EQUEST NUMBER	₹		
	(9)	(10)	(11)	(12)	(13)	(14)	(15)
	FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	Bill Frequency	Customer Billed Date (mm/yyyy)	Last Day of Work Performed (mm/dd/yyyy)	Total (Undiscounted) Amount for Service (14.2 digits max.)	Discount Amount Billed to USAC (14.2 digits max.)
4			DO NOT WRITE IN THIS COLUMN.	For each FRN, comple or Column (13), but	te either Column (12) not both Columns		for dollars and cents
	650387	1848573		07/01/2009		207,933	14,208.75
2	696098	1913013		07/01/2009		230,436	17,152,94
4							
5							
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9			_				
10							
11							
12							
13							
14							
	TC	TAL REIMBURS	MENT AMOUNT	TO BE ENTERED	INITO ITEM (9)		31,361.69
_				ry um fitteren.	1641 (1) 1 (2) [16]		31.301.69

BILLED ENTITY APPLICANT Reimbursement Form					
471 Billed Entity Name Pueblo City School District 60					
471 Billed Entity Number 142321					
Contact Name_Cassie Walgren					
Reimbursement Form Number Unite-2					
Block 3: Billed Entity Certification					
I certify that I am authorized to submit this Billed Entity Applicant Relmb schools, libraries, or consortia of those entitles represented on this Forr information and belief, as follows:	n, and certify to the best of my knowledge.				
A. The discount amounts listed in Column (16) of this Billed Entity Approbarges for eligible services delivered to and used by eligible school educational purposes, on or after the service start date reported on	ols, libraries, or consortia of those entities for the associated Form 486				
B. The discount emounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.					
C. The discount amounts listed in Column (15) of this Billed Entity App	licant Reimbursement Form are for eligible				
D. I recognize that I may be audited pursuant to this application and withat I rely upon to fill in this form.	1 Funding Commitment Decision Latter				
16. Signature of authorized person	17. Date				
Daniel Cart	8 NOV 2010				
18. Printed name of authorized person					
Daniel E. Combs					
19. Title or position of authorized person					
Director of Technology					
20. Telephone number of authorized person					
7195497292					
21. Address of authorized person					
1920 Montezuma Road					
Pueblo, CO 81003					

94]					
BILLED ENTITY APPLICANT Reimbursement Form	BILLED ENTITY APPLICANT Reimbursement Form				
471 Billed Entity Name Pueblo City School District 60					
471 Billed Entity Number 142321					
Contact Name Cassie Walgren					
Reimbursement Form Number Unite-2					
Block 4: Service Provider Acknowledgment					
I certify that I am authorized to submit this Service Provider Acknowle	dgment for this Billed Entity Applicant				
Reimbursement Form, and acknowledge to the best of my knowledge	, information and belief, as follows:				
A. The service provider must remit the discount amount authorized t	by the fund administrator to the Billed Entity				
Applicant who prepared and submitted this Billed Entity Applicant	Reimbursement Form as soon as possible				
after the fund administrator's notification to the service provider of	the amount of the approved discounts on this				
Billed Entity Applicant Reimbursement Form, but in no event later reimbursement payment from the fund administrator, subject to the					
The service provider must remit payment of the approved discour	at amount to the Rilled Entity Annicant prior to				
tendering or making use of the payment issued by the Universal S	Service Administrative Company to the service				
provider of the approved discounts for the Billed Entity Applicant I	Reimbursement Form.				
22. Signature of authorized person (fax, copy or original signature)	23. Date				
	11-11-10				
- Lander via L. L. Seeren	A Professional Contraction of the Contraction of th				
24. Printed name of authorized person					
at No.					
Dennis Devoy					
25. Title or position of authorized person	and the strength of the streng				
we. And or position of admonized person					
CFO CFO					
The three th					
26. Telephone number of authorized person					
816-544-2902					
27. Address of authorized person					
P.O. Box 25526					
Kansas City MO 64119					
a section of the sect					

A paper copy of this Form (pages 1-4) should be mailed to:

SLD BEAR Form P. O. Box 7026 Lawrence, KS 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form (pages 1-4) should be mailed to:

SLD Forms ATTN: SLD BEAR Form 472 3833 Greenway Drive Lawrence, KS 66046 Phone: 1-888-203-8100

Page 4 of 4 FCC Form 472 April 2007

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Do not write in this space.

Approval by OMB 3060 – 0856
Estimated time per response: 1.5 hours

### Universal Service for Schools and Libraries

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

## BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

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BLOCK 1: HEADER INFORMATION

1. 471 Billed Entity Name	Pueblo City School District 60	
2. 471 Billed Entity Number	142321	
3. Service Provider Identification Number (SPIN)	143010971	
4. Contact Name	Cassie Walgren	
5. Contact Telephone Number	719-549-7121	
6. Reimbursement Form Number	MineTech	

7. Reimbursement Date to USAC

8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)

\$2,258.31

	Billed Entity Applicant Reimbursement Form  For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.						
	71 Billed Entity Name	Pueblo City School				ntity Number 1423	
Co	ontact NameCassie	Walgren		Contac	t Telephone Numb		
Re	Reimbursement Form Number Micro Tech BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER						
PL	LOCK 2: LINE ITEM	M INFORMATION			₹		
	(9)	(10)	(11)	(12)	(13)	(14)	(15)
77.00	FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	Bill Frequency	Customer Billed Date (mm/yyyy)	Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	Total (Undiscounted) Amount for Service (14.2 digits max.)	Discount Amount Billed to USAC (14.2 digits max.)
	É		DO NOT WRITE IN				
1	606000		THIS COLUMN.	or Column (13), but	not both Columns	14.2 digits allows	for dollars and cents
	696098	1912965	<u> </u>	07/01/2009		36,394	2,258.31
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4					· · · · · · · · · · · · · · · · · · ·		
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11							
12	<i>i</i>					<u> </u>	
13							
14							
	TO	TAL REIMBURSI	EMENT AMOUNT	TO BE ENTERED	INTO ITEM (8)	<b>~</b> .	2,258.31

BILLED ENTITY APPLICANT Reimbursement Form						
471 Billed Entity Name Pueblo City School District 60						
471 Billed Entity Number 142321						
Contact NameCassie Walgren						
Reimbursement Form Number MicroTech						
Block 3: Billed Entity Certification						
I certify that I am authorized to submit this Billed Entity Applicant Reimb schools, libraries, or consortia of those entities represented on this Forn information and belief, as follows:						
A. The discount amounts listed in Column (15) of this Billed Entity App charges for eligible services delivered to and used by eligible schoo educational purposes, on or after the service start date reported on	ls, libraries, or consortia of those entities for					
B. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.						
C. The discount amounts listed in Column (15) of this Billed Entity App services approved by the fund administrator pursuant to a Form 471	Funding Commitment Decision Letter.					
<ul> <li>I recognize that I may be audited pursuant to this application and wi that I rely upon to fill in this form.</li> </ul>	Il retain for five years any and all records					
16. Signature of authorized person	17. Date					
Daniel Cant	8 Nov 2010					
18. Printed name of authorized person						
Daniel E. Combs						
19. Title or position of authorized person						
Director of Technology						
20. Telephone number of authorized person						
7195497292						
21. Address of authorized person						
1920 Montezuma Road	1920 Montezuma Road					
Pueblo, CO 81003						

Page 3 of 4 FCC Form 472 April 2007

719-549-7100

11/11/2010 10:00:20 AM PAGE

5/005

Fax Server

	BILLED ENTITY APPLICANT Reimburgement Form				
Reimbursement Form Number  MicroTech  Block 4: Service Provider Acknowledgment  I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:  A The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the approved discount on this Billed Entity Applicant Reimbursement payment from the fund administrator, subject to the restriction set forth in 6, below.  B. The service provider must remit payment of the approved discount amount to the Billed Entity Applicant prior to tendering or making use of the payment issued by the Universal Service Administrative Company to the service provider of the approved discounts for the Billed Entity Applicant Reimbursement Form.  22. Signature of authorized person  **Executive Assartament**  Executive Assartament**  Executive Assartament**  Talephone number of authorized person  **Executive Assartament**  Talephone number of authorized person	471 Billed Entity Name Pueblo City School District 60				
Reimbursement Form Number    Block 4: Service Provider Acknowledgment     I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant     Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:   A. The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity     Applicant who prepared and submitted this Billed Entity     Applicant Form as soon as possible	471 Billed Entity Number 142321				
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:  A. The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form, but in no event later than 25 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in 8, below.  B. The service provider must remit payment of the approved discount amount to the Billed Entity Applicant tendering or making use of the payment issued by the Universal Service Administrative Company to the service provider of the approved discounts for the Billed Entity Applicant Reimbursement Form.  22. Signature of authorized person  Executive Passes Form  Executive Passes Form  303-307-307-3077  303-307-307-3077					
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24. Printed flame of authorized person  Kaven Feldman  25. Title or position of authorized person  Executive Assistant  26. Telephone number of authorized person  303-307-3077	22. Signature of authorized person (fax, copy or original signature)   23. Date				
24. Printed flame of authorized person  Kaven Feldman  25. Title or position of authorized person  Executive Assistant  28. Telephone number of authorized person  303-307-3077	Haren feed war 12/1/2010				
25. Title or position of authorized person  Executive Assistant  26. Telephone number of authorized person  303-307-3077	24. Printed name of authorized person				
Executive Assistant  26. Telephone number of authorized person  303-307-3077	Karen Feldman				
26. Telephone number of authorized person $303-307-3077$					
303-307-3077	Executive Assistant				
27. Address of authorized person 5600 Greenwood Plaza Blud Suite 300	303-307-3077				
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A paper copy of this Form (pages 1-4) should be mailed to: SLD BEAR Form

P. O. Box 7026

Lawrenco, K8 88044-7026

if sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form (pages 1-4) should be mailed to:

SLD Forms

ATTN: SLD BEAR Form 472 3883 Greenway Drive Lawrence, KS 66045 Phone: 1-888-203-8100

## Exhibit 9





#### Form 472 (BEAR) Notification Letter

November 24, 2010

Dennis Devoy Unite Private Networks, LLC 950 west Highway 92 Suite 203 Kearney, MO 64060

Re:

Invoice Number - as assigned by USAC: 1418966 Service Provider Identification Number: 143029868 Reimbursement Form Number: UNITE-2

Billed Entity Number: 142321

Cassie Walgren PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003

> Preferred Mode of Contact: E-mail at cassandra.walgren@pueblocityschools.us Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

We recommend using the BEAR Online tool from the Apply Online area or Required Forms section of our website for additional submissions. If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

Pursuant to the Federal Communication Commission's (FCC) Second Report and Order and Further Notice of Proposed Rulemaking (FCC 03-101, released April 29, 2003), you must remit the amount shown as "Total Amount of Reimbursement Approved for Payment" above to your customer no later than 20 days after receipt of payment of the approved discounts from USAC. You also agreed not to tender or make use of the payment of the approved discounts issued by USAC to you prior to remitting the discount to your customer (See BEAR Form, Block 4, Service Provider Acknowledgment).

The USAC check should be mailed to the service provider named above within 20 days of the date of this letter.

Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685 Visit us online at: www.usac.org/sl The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division Universal Service Administrative Company

CC: PUEBLO CITY SCHOOL DISTRICT 60

#### BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 650387 Funding Request Number: 1848573 Funding Year 2009: 07/01/2009 - 06/30/2010

Contract Number: N/A
Funding Commitment Decision: \$14208.75
Reimbursement Amount for this FRN: \$0.00
Reimbursement Request Decision Explanation:
Billed Date Before 486 Service-Start Date;

Form 471 Application Number: 696098
Funding Request Number: 1913013
Funding Year 2009: 07/01/2009 - 06/30/2010
Contract Number: N/A
Funding Commitment Decision: \$17152.94
Reimbursement Amount for this FRN: \$0.00
Reimbursement Request Decision Explanation:
Billed Date Before 486 Service-Start Date;



USAC Schools and Libraries Division Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685



00402 Cassie Walgren PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003







#### Form 472 (BEAR) Notification Letter

November 24, 2010

Karen Feldman Microtech-Tel 5600 Greenwood Plaza Blvd Suite 300 Greenwood Village, CO 80111

Re:

Invoice Number - as assigned by USAC: 1418965 Service Provider Identification Number: 143010971

Reimbursement Form Number: MICROTECH

Billed Entity Number: 142321

Cassie Walgren PUEBLO CITY SCHOOL DISTRICT 60 315 W. 11th Street Pueblo, CO 81003

Preferred Mode of Contact: E-mail at cassandra.walgren@pueblocityschools.us Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

We recommend using the BEAR Online tool from the Apply Online area or Required Forms section of our website for additional submissions. If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

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The USAC check should be mailed to the service provider named above within 20 days of the date of this letter.

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division Universal Service Administrative Company

CC: PUEBLO CITY SCHOOL DISTRICT 60

# Exhibit 10

FCC Form 472

Do not write in this space.

Approval by OMB 3060 – 0856 Estimated time per response: 1.5 hours

Universal Service for Schools and Libraries

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

## **BILLED ENTITY APPLICANT REIMBURSEMENT FORM**

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 593(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1901.

#### FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3050-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@foc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0856.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

#### **BLOCK 1: HEADER INFORMATION**

1. 471 Billed Entity Name	Pueblo City School District 60
2. 471 Billed Entity Number	142321
3. Service Provider Identification Number (SPIN)	143029868
4. Contact Name	Cassie Walgren
5. Contact Telephone Number	719-549-7121
6. Reimbursement Form Number	Unite-2
7. Reimbursement Date to USAC	12/1/2010
8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)	\$31,361.69

	Billed Entity Applicant Reimbursement Form						
	For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.						
47	471 Billed Entity Name  Pueblo City School District 60  471 Billed Entity Number						
C	ontact NameCassi	e Walgren					
R	Contact Name Contact Telephone Number 719-549-7121  Reimbursement Form Number 1 1 2					······································	
В	LOCK 2: LINE ITE	M INFORMATION	PER FUNDING F	EOUEST MUMDER	3		
	(9)	(10)	(11)	(12)	(13)	(14)	(46)
	FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	Bill Frequency	Customer Billed Date (mm/yyyy)	Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	Total (Undiscounted) Amount for Service (14.2 digits max.)	(15) Discount Amount Billed to USAC (14.2 digits max.)
			DO NOT WRITE IN	For each FRN, comple	te either Column (12)		
1	650387	1848573	THIS COLUMN.	or Column (13), but	not both Columns		for dollars and cents
2	696098	1913013		6/16/2010		207,933	14,208.75
3	~~~~	X313013		6/16/2010		230,436	17,152.94
4							
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12							
13						1	
14							
	TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8) 31,361.69						

BILLED ENTITY APPLICANT Reimbursement Form					
471 Billed Entity Name Pueblo City School District 60					
471 Billed Entity Number 142321					
Contact Name Cassie Walgren					
Relmbursement Form Number Unite-2					
Block 3: Billed Entity Certification					
I certify that I am authorized to submit this Billed Entity Applicant Reimb schools, libraries, or consortia of those entities represented on this Forn information and belief, as follows:  A. The discount amounts listed in Column (15) of this Billed Entity App	n, and certify to the best of my knowledge,				
educational purposes, on or after the service start date reported on B. The discount amounts listed in Column (15) of this Billed Entity App billed by the service provider and pald by the Billed Entity Applicant consortia of those entities.	educational purposes, on or after the service start date reported on the associated Form 486.  The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and pald by the Billed Entity Applicant on behalf of eligible schools, libraries, and				
<ul> <li>C. The discount amounts listed in Column (15) of this Billed Entity Applies services approved by the fund administrator pursuant to a Form 471</li> <li>D. I recognize that I may be audited pursuant to this application and with the I rely upon to fill in this form.</li> </ul>	Letthaina Compoitment Doninion Letter				
16. Signature of authorized person	17. Date				
Danuf Cornel	12-2-2010				
18. Printed name of authorized person	L				
Daniel E. Combs					
19. Title or position of authorized person					
Director of Technology					
20. Telephone number of authorized person					
7195497292					
21. Address of authorized person					
1920 Montezuma	·				
Pueblo,CO 81003					

BILLED ENTITY APPLICANT Reimbursement Form				
471 Billed Entity Name Pueblo City School District 60				
471 Billed Entity Number 142321				
Contact Name Cassie Walgren	д и b + 1 f p h = 8 km ч ч м м ч ч м ч м ч м ч м ч м ч м ч м			
Reimbursement Form Number Unite-2				
Block 4: Service Provider Acknowledgment	14-0-15-0-16-0-16-0-16-0-16-0-16-0-16-0-16			
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:  A. The service provider must remlt the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form, but in no event later than 20 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in B, below.				
B. The service provider must remit payment of the approved discourt tendering or making use of the payment issued by the Universal provider of the approved discounts for the Billed Entity Applicant.	nt amount to the Billed Entity Applicant prior to Service Administrative Company to the service Reimbursement Form			
22. Signature of authorized person (fax, copy or original signature)	23. Date			
Dennis R. Dway	12-4-10			
24. Printed name of authorized person	A SECURITY OF THE THE PROPERTY OF THE PROPERTY			
Dennis Devoy				
25. Title or position of authorized person				
CFO				
26. Telephone number of authorized person				
816-564-2902				
27. Address of authorized person	TO THE OWNER OF THE PROPERTY OF THE RESIDENCE AS A SECOND OF THE PROPERTY OF T			
P.O. Box 25526				
Kansus City, 200 64119				

A paper copy of this Form (pages 1-4) should be malled to: SLD BEAR Form

SLD BEAR Form P. O. Box 7026 Lawrence, KS 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form (pages 1-4) should be mailed to:

SLD Forms ATTN: SLD BEAR Form 472 3833 Greenway Drive Lawrence, KS 66046 Phone: 1-888-203-8100

FCC Form 472	Do not write in this space.	Approval by OMB
		Estimated time per response: 1.5 hours
U Please read instructions before completing.	Universal Service for Schools and Libraries	ries (To be completed by echants libraries or consentia)
BILLED ENTIT	NTITY APPLICANT REIMBURSEMENT FORM	
For reimbursement of d	For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.	the Billed Entity Applicant.
Must be completed and s	Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.	he relevant service provider.
Persons willfully making false statements on this form can be punish United States Code, 18 U.S.C. Sec. 1001.	led by fine or forfelture, under the Communications Act, 4	Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.
FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE	IND THE PAPERWORK REDUCTION ACT	
Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.	nation on this form. Failure to provide all requested informatio le for public inspection. Your response is required to obtain th	Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.
The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, plea write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.	from 1 to 2 hours per response, including the time for reviewin on. If you have any comments on this burden estimate, or how rk Reduction Act Project (3060-0856), Washington, DC 20554.	The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.
Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government m. OMB control number of 3060-0856,	sponsored by the Federal government, and the government r ction has been assigned an OMB control number of 3060-085	Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number of 3060-0856.
THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PULAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.	974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 6	BLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC
BLOCK 1: HEADER INFORMATION		
1. 471 Billed Entity Name	Pueblo City School District 60	ool District 60
2. 471 Billed Entity Number	142321	
3. Service Provider Identification Number (SPIN)	143010971	
4. Contact Name	Cassie Walgren	
5. Contact Telephone Number	719-549-7121	
6. Reimbursement Form Number	MicroTech	
7. Reimbursement Date to USAC	12/1/2010	
8. Total Reimbursement Amount (total of Block 2, Item 15	5 – 14.2 digits maximum) <b>2,258.31</b>	

April 2007
2
FCC Form 472
Page 2 of 4

TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8)

2,258.31

BILLED ENTITY APPLICANT Reimbursement Form		
471 Billed Entity Name Pueblo City School Disrtict 60		
471 Billed Entity Number 142321		
Contact Name_Cassie Walgren		
Reimbursement Form Number MicroTech		
Block 3: Billed Entity Certification		
I certify that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and certify to the best of my knowledge, information and belief, as follows:		
A. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form represent charges for eligible services delivered to and used by eligible schools, libraries, or consortia of those entities for educational purposes, on or after the service start date reported on the associated Form 486.		
B. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.		
C. The discount amounts listed in Column (15) of this Billed Entity App	licant Reimbursement Form are for eligible	
services approved by the fund administrator pursuant to a Form 471 Funding Commitment Decision Letter.  D. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.		
16. Signature of authorized person	17. Date	
18. Printed name of authorized person		
Daniel E. Combs		
19. Title or position of authorized person		
Director of Technology		
20. Telephone number of authorized person		
7195497292		
21. Address of authorized person		
1920 Montezuma Road		
Pueblo, CO 81003		

BILLED ENTITY APPLICANT Reimbursement Form		
471 Billed Entity Name Pueblo City School District 50		
471 Billed Entity Number 142321		
Contact Name Casala Walgren		
Reimbursoment Form Number		
I MINCK A: Bervice Provider Acknowledgilett		
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursoment Form, and acknowledge to the best of my knowledge, information and telial, as follows:		
LA The service provider must be discoult amount authorized by the Linu sommistanor to the cards thiny		
Applicant who prepared and submitted this Billed Entity Applicant Reimbersement Form as soon as possible after the fund administrator's notification to the service provider of the arround of the approved discounts on this		
Billed Entity Applicant Reimbursement Form, but in no event later than 20 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in 8, below.		
R The service provider must remit revision of the soproved discount emount to the Billed Entity Applicant prior to		
tendering or making use of the payment issued by the Universal Service Administrative Company to the service provider of the approved discounts for the Silled Entity Applicant Remburgement Form.		
22. Signature of authorized person fax, copy or original signature) 23. Date		
Baren Feldman 12/3/10		
24. Printed name of authorized person		
Karen Feldman		
26. Title or position of authorized person		
Executive Assistant		
28. Telephone number of authorized person		
303-307-3077		
27. Address of authorized person		
27. Address of Buthurized person 56.00 Greenwood Plaza Blud Suite 300		
greenwood Village, Co 80111		

A paper copy of this Form (pages 1-4) should be mailed to: 9LD BEAR Form P. O. Box 7026

Lawrence, KS 88044-7028

If sont by express delivery services or U.S. Postal Service, Return Reculpt Requested, the form (pages 1-4) should be mailed to:

SLD Forms ATTN: SLD BEAR Form 472 3833 Greenway Drive Lawrence, K3 88046 Phone: 1-888-203-8100

Page 4 of 4

FCC Form 472

April 2007